

State of Minnesota

District Court
Probate Division

County of _____

Judicial District: _____

Court File No. _____

Case Type: 14, Conservatorship

In Re: ☐ Guardianship

☐ Conservatorship of

Affidavit of Personal Service

State of Minnesota)

) SS

County of _____)

_____, says that on _____
20____, the undersigned personally served the _____

(document served) on the ward or protected person and that the present address and telephone number of
the ward or protected person is: _____

I declare under penalty of perjury that everything I have stated in this document is true and
correct. Minn. Stat. § 358.116.

Date: _____

Signature of Affiant (Guardian/Conservator or other person
who serves the documents on the ward/protected person)

**THIS PAGE MUST BE COMPLETED AND RETURNED TO THE COURT WITH A
COPY OF THE DOCUMENT GIVEN TO THE WARD / PROTECTED PERSON**